

VZCZCXRO2233  
RR RUEH DU RUEHJO  
DE RUEHSA #1385/01 1101537  
ZNR UUUUU ZZH  
R 201537Z APR 07 ZFF4  
FM AMEMBASSY PRETORIA  
TO RUEAUSA/DEPT OF HHS WASHDC  
RUEHPH/CDC ATLANTA GA 1757  
RUEHC/SECSTATE WASHDC 9278  
INFO RUEHTN/AMCONSUL CAPE TOWN 4207  
RUEH DU/AMCONSUL DURBAN 8759  
RUEHJO/AMCONSUL JOHANNESBURG 6548

UNCLAS SECTION 01 OF 02 PRETORIA 001385

SIPDIS

SIPDIS

CDC ATLANTA FOR STEVE BLOUNT  
DHHS FOR OGHA

E.O. 12958: N/A  
TAGS: [ECON](#) [SOC](#) [SF](#)  
SUBJECT: SOUTH AFRICAS NATIONAL POLICY ON AGING

REF: STATE 29783

-----  
Summary  
-----

1. (U) South Africa shares mortality risks and aging challenges similar to many developing countries. According to South Africa's 2001 census, South Africa had 2.2 million people aged 65 years or older, representing 4.9 percent of the total population. There is a significant non-communicable or chronic disease problem among the elderly. Current disability statistics are difficult to ascertain. HIV prevalence in persons over 60 years of age is 4.0 per cent of males and 3.7 per cent of females among the 5.4 million people in South Africa living with HIV and AIDS. South Africa's aging challenges are compounded by its growing HIV and AIDS problem. The South African Government's program to provide subsidies for those who care for orphaned children is undermined when the elderly themselves fall victim to chronic disease and HIV and AIDS. End Summary.

-----  
South Africa's Elderly Population  
-----

2. (U) South Africa shares mortality risks and aging challenges similar to many developing countries. According to South Africa's 2001 census, South Africa had 2.2 million people aged 65 years or older, representing 4.9 percent of the total population. This elderly population was 68.9 percent Black, 21.6 percent White, 7.2 percent Colored and 2.3 percent Indian. The elderly population dropped from 788,000 aged 65-69 years to only 157,000 aged 85 years or more (of which one-third was male and two-thirds was female). According to the same census, the majority of the elderly population live in the more rural provinces and, if there, live in more traditional housing situations. Sixty-eight percent of the elderly report being regarded as head of household. Those in the more populated provinces are more often institutionalized or living in homes for the elderly.

-----  
Causes of Death  
-----

3. (U) There is a significant chronic disease problem among the elderly. The most recent study of disease among the elderly is the Medical Research Council's (MRC) Revised Burden of Disease Report, which contained 2000 data that was published in 2003. According to this report, the leading specific causes of death among older persons are ischaemic

heart disease, stroke, hypertensive heart disease, chronic obstructive pulmonary disease and diabetes mellitus. Ischaemic heart disease and stroke together account for almost one-third of deaths. The South African health website confirms this information, with the major cause of death being non-communicable or chronic diseases. When lumping the individual causes of death together into disease categories, cardiovascular disease is the primary cause of death, accounting for 43 percent of individuals over 60, followed by malignant neoplasms (16 percent), respiratory disease (10 percent), infectious/parasitic disease excluding HIV/AIDS (8 percent), and diabetes mellitus (6 percent).

¶4. (U) These figures are reinforced by earlier studies. The Human Science Research Council (HSRC)/University of Cape Town Centre for Gerontology Multidimensional Survey of Elderly South Africans in 1990-91 found that the most prevalent self-reported condition affecting Blacks, Asians and Coloreds was high blood pressure (hypertension). This condition went untreated for 11 percent of both urban and rural Blacks. A subsequent national household survey by Hirschowitz and Orkin in 1995 confirmed the importance of hypertension and also found that 70 percent of the elderly (age 65 and over) had a chronic illness or ongoing health problem. More than half of survey respondents reported having a disability, the most common being difficulty with vision.

-----  
Disability Prevalence  
-----

¶5. (U) Current disability statistics are difficult to ascertain. Almost 400,000 elderly report having at least one disability, such as vision, hearing, communication, physical,

PRETORIA 00001385 002 OF 002

intellectual or emotional. The stratification of disabilities for males and females is similar. Some 17.6 percent of the elderly report multiple disabilities.

-----  
HIV Prevalence  
-----

¶6. (U) According to the HSRC November 30, 2005 fact sheet on HIV prevalence by age, HIV prevalence in persons over 60 years of age is 4.0 per cent of males and 3.7 per cent of females among the 5.4 million people in South Africa living with HIV and AIDS. HIV prevalence in persons over 50 years of age is estimated to be 5.7 percent. However, the study cohort for these older age groups is small, so these figures should be viewed with some caution. (Note: See [www.hsrb.ac.za/factsheet-40.phtml](http://www.hsrb.ac.za/factsheet-40.phtml) for a more detailed breakdown. End Note.)

¶7. (U) Goal 9 of the HIV and AIDS and STI Strategic Plan for South Africa, 2007 (NSP) refers to the mitigation of the impact of HIV and AIDS in order to create an enabling and social environment for care, treatment and support. The death rate among females over the age of 50 in 2005 was more than 2.5 times the 1997 rate. This is due largely to communicable disease, parasitic opportunistic infection, and disorders of the immune system. The death rate among males had the same dramatic increase in the mortality rate and was due to the same conditions, with the addition of infectious causes.

¶8. (U) NSP Objective 9.3 is "to strengthen the implementation of policies and services for older people affected by HIV and AIDS." This includes activities to create awareness about the impact of HIV and AIDS and the promotion of the integration and equitable representation of older persons in home and community-based care programs. These activities are good ways to involve the elderly and ensure that they are part of the system of available services. NSP Objective 9.4 is "to mainstream the provision

of appropriate care and support services to HIV-positive people with disabilities and their families." This will also provide resources to the elderly who are heads of household and who often take care of several generations and provide care and support to persons living with AIDS within the household.

-----  
Comment  
-----

19. (U) South Africa's aging challenges are compounded by its growing HIV and AIDS problem. HIV and AIDS has had a disproportionate impact on the parents of young children. As a result, the elderly (grandparents) often find themselves taking care of children at a time when it is they who need to be taken care of. There are now an estimated three million orphans and many of these orphans are being supported and cared for by their grandparents. The South African Government is addressing this problem by providing subsidies for those who care for orphaned children. This money often provides economic support for both the grandparents and the children. This program is undermined when the elderly themselves fall victim to chronic disease and HIV and AIDS.  
End Comment.  
BOST